

Indian Health Service Olympic District Office 4060 Wheaton Way, Suite E Bremerton, WA 98310 (360) 792-1235

November 29, 2012

Lukas Reyes Utilities Superintendent 8802 27<sup>th</sup> Ave NE Tulalip, WA 98271

Dear Mr. Reyes:

The attached report contains the findings of the **Tulalip Quil Ceda wastewater (MBR) system** survey\_conducted on **October 23, 2012**. The survey was conducted by Karin Knopp(IHS), Jason Schneider (IHS), and Mike Cooney (Tulalip Tribes). Present during the survey were Lukas Reyes (interview portion); and field workers Jeremy and Jaret (plant, pump station, and drainfield tours).

The purpose of the survey was to assess the current mechanical condition of the community wastewater system. The MBR system is well maintained and is functioning properly. The main concern is the lack of sanitary facilities for the staff (see comments in the report).

If there are any questions or concerns regarding this letter, please contact me or Jason Schneider at the IHS Olympic District Office in Bremerton, WA at (360) 792-1235.

Sincerely,

Karin Knopp, R.S.

District Environmental Health Officer

Indian Health Service

Jason Schneider, P.E. Tribal UIC Consultant Indian Health Service



#### Liquid Waste Survey



IHSENV\_SurveyReport.rpt

Indian Health Service Olympic District Office 4060 Wheaton Way, Suite E Bremerton, WA 98310 (360) 792-1235

Tulalip CSS-Quil Ceda MBR 8802 27th Ave NE Tulalip, WA 98271 (360) 716-5000

Survey Date: 10/23/2012 Time In: 10:00 AM Time Out: 3:00 PM Survey Purpose: Routine

Total # of Violations:

0 # of Critical Violations: 0

# of Repeat Critical Violations:

Score:

0

Latitude / Longitude:

Circle designated compliance status (IN, OUT, N/O, N.A) for each numbered item

Manager: Permit #:

Estab. Type: 28 Community Liquid-waste Disposal System

Mark "X" in appropriate box for COS and/or R

In=in compliance OUT=not in compliance N/A=not applicable N/O=not ob	served	COS=corrected on-site during inspection R=repeat	
IN OUT N/A N/O	COS R	IN OUT N/A N/O	COS R
Technical Capacity		29 [X][ ][ ] System insured (self-insured or other)	[][]
1 [ ] [ X] [ ] System is in compliance with EPA CWA monitoring and reporting	[][]	30 [X][][][] Business plan in place	[][]
2 [X] [ ] [ ] Sampling plan with influent and effluent quality monitored and reported	[][]	Manholes And Lines	
3 [X][][] Volume of WW treated is recorded (daily/monthly/annually)	[][]	31 [X][][][] Manhole covers in good condition with good fit	[][]
4 [X][][][] Operator is certified at appropriate level for system	[][]	32 [X][ ][ ] Manholes and lines protected from erosion	[][]
5 [X][][][] System is approved and meets design standards	[][]	33 [X][ ][ ] Interior of manholes free of debris	[][]
6 [X][][][] Operation and Maintenance manuals available	[][]	34 [X][ ][ ] Interior of manholes shows no evidence of inflow or infiltration	[][]
7 [X][][][] Preventive maintenance plan developed and followed	[][]	35 [X][ ][ ] Flushing frequency and records adequate	[][]
8 [X] [ ] [ ] Back-up sources available ( power, pumps, trucks, etc)	[][]	36 [X][][][] Precautions applied for confined space entry	[][]
9 [X][][] As-builts and site plans/maps are on hand and current	[][]	37 [X][ ][ ] Valves exercised regularly	[][]
10 [X][][][] PPE and safety equipment are available and used	[][]	38 [X][ ][ ] Manholes, valves and lines mapped and surveyed	[][]
11 [X][][][System inventory completed (spare parts, tools, equipment)	[][]	Lift Stations	
Managerial Capacity		39 [ ] [ ] [X] [ ] Ventilation system functions properly and good repair	[][]
12 [X] [ ] [ ] System has a formal O&M plan or program	[][]	40 [X][][] Fence and gate with lock, adequate security	[][]
13 [X][][][] Utility ordinance(s) in place	[][]	41 [X][][] Pumps; noise not excessive, lubricated regularly	[][]
14 [X][][][] Plans exist for the following: system security/vulnerability assessment	[][]	42 [X][][][] Bar screen, communitor, sump pump, valves operate regularly	[][]
15 [X][ ][ ] Plans exist for the following: emergency	[][]	43 [X][][][] Alarm/warning system operational, tested	[][]
16 [X] [ ] [ ] Plans exist for the following: health and safety	[][]	44 [X][ ][ ] Screenings properly disposed	[][]
17 [X] [ ] [ ] Plans exist for the following: other:	[][]	45 [X][ ][ ] Ladders sound	[][]
18 [X] [ ] [ ] Capital improvement plan or master plan developed	[][]	46 [X][][] Probes, floats, bubble lines or transducers are operational	[][]
19 [X][][] Customer complaints are logged and evaluated	[][]	47 [X][][] Lights, dehumidifier, heater, heater and fan operate properly	[][]
20 [X] [ ] [ ] System structure within formal organizational chart and authorities	[][]	48 [X][][] Pump (pneumatic) discharge & suction pressure adequate	[1[]
21 [X][][][] Staffing adequate and personnel descriptions exist	[][]	49 [X][ ][ ] Pump records maintained	[][]
22 [X] [ ] [ ] Utility administrative staff trained in utility management	[][]	50 [X][][] As-built and design data available	[][]
23 [X][][][] Management has resource guide or knowledge of TA links	[][]	Community Septic Tank System	
Financial Capacity		51 [X][ ][ ] No sewage evident on ground	[][]
24 [X][][][] Annual operating budget prepared	[][]	52 [X][ ][ ] Distribution box free of debris, functioning properly	[][]
25 [X] [ ] [ ] Budget covers expenditures, staff, training and emergencies	[][]	53 [X][][] Inspection ports identified, covered and in good condition	[][]
26 [X][][][] Rate structure in place	[][]	54 [X][][] Inlets and outlets functioning property	[][]
27 [X][][][] Fees collected and recorded	[][]	55 [X][][][] Sludge and scum levels checked annually	[][]
28 [X][ ][ ] Fee collection rate >50%	[][]	56 [X][][][] Tanks pumped every 2 -3 years, or as needed	[][]

Person in	EHS	
Charge	Signature	
Print Name	Karin Knopp	

Next Survey Date: 10/23/2013 Next Survey Purpose: Routine

#### Liquid Waste Survey



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Permit #:

Estab. Type: 28 Community Liquid-waste Disposal System

In=in compliance OUT=not in compliance N/A=not applicable N/O=not of	COS=corrected on-site during inspection R=repeat		
IN OUT N/A N/O	COS R	IN OUT N/A N/O	COS R
57 [X][][][] As-builts available	[][]	90 [X][ ][ ] Screenings properly disposed	[][]
Vaste Stabilization Pond Or Lagoon		Advanced Treatment Processes	
58 [ ] [ ] [X] [ ] Access road in good condition	[][]	91 [X][ ][ ] Aeration functioning properly	[][]
59 [ ] [ ] [X] [ ] Fence in good condition, locked gate, warning signs posted	[][]	92 [ ] [ ] [X] [ ] Solid materials settle out in primary clarifier	[][]
60 [ ] [ ] [X] [ ] Adequate freeboard, pond liquid at appropriate depth (>2 feet)	[][]	93 [ ] [ ] [X] [ ] Baffles are in place and are functioning properly	[][]
61 [ ] [ ] [X] [ ] Sludge depth measured annually or on a schedule	[][]	94 [ ] [ ] [X] [ ] Skimming process is operational	[][]
62 [ ] [ ] [X] [ ] Appearance and odor acceptable	[][]	95 [ ] [ ] [X] [ ] Sludge and scum accumulation is controlled	[][]
63 [ ] [ ] [X] [ ] Floating material minimized	[1[]	96 [X][][] Solids removed and placed in another treatment process	[][]
64 [ ] [ ] [X] [ ] Insect breeding and aquatic vegetation controlled	[][]	97 [X][][] Controls are adequate and allow flexibility to optimize performance	[][]
65 [ ] [ ] [X] [ ] Dikes sound; free of erosion and burrows; weeds controlled	[][]	98 [X][][] Adjustments to process and flow rates are recorded and monitored	[][]
66 [ ] [ ] [X] [ ] Valve boxes; marked, sound condition, covered, no debris	[][]	99 [X][ ][ ] Sufficient oxygen transfer capacity is available	[][]
67 [ ] [ ] [X] [ ] Diversion structure free of solids, debris	[][]	100 [X][ ][ ] Aeration is functioning properly	[][]
68 [ ] [ ] [X] [ ] Chlorination maintained, chemicals available, stored properly	[][]	101 [ ] [ X] [ ] Secondary clarifier provides adequate sedimentation	[][]
69 [ ] [ ] [X] [ ] Aerators functioning properly	[][]	102 [X][][] Advanced treatment process maintained to meet effluent limit	[][]
70 [ ] [ ] [X] [ ] EPA NPDES permit if discharging	[][]	103 [X][][] Disinfection equipment maintained and operated properly	[][]
71 [ ] [ ] [X] [ ] As-built and design data (load, detention time, etc) available	[][]	104 [ ] [ ] [X] [ ] Feed rates are proportional to effluent flow	[][]
Beneficial Reuse/Land Treatment Processes		105 [ ] [ ] [X] [ ] Contact time is sufficient	[][]
72 [ ] [ ] [X] [ ] Wastewater meets water quality standards for reuse	[][]	106 [X][][] Sludge treatment process is adequate	[][]
73 [ ] [ ] [X] [ ] Piping and/or applicator in good condition	[][]	107 [X][][] Waste is controlled	[][]
74 [ ] [ ] [X] [ ] Minimum preapplication treatment met (sedimentation or	[][]	108 [X][][][] Adequate facilities exist for drying, hauling, handling and disposal	[][]
comminution) 75 [ ] [ ] [X] [ ] Vegetation used to assist treatment	[][]	109 [X][][] EPA regulatory requirements are followed	[][]
76 [ ] [ ] [X] [ ] As-built and design data available	[][]	Laboratory	
Sewage Treatment Plants		110 [X][][] Monitoring equipment adequate, calibrated; procedures posted	[][]
77 [X][ ][ ] Site secured with locks; limited access; warning signs posted	[][]	111 [X][][][] Facility in good condition, maintained, adequate space available	[][]
78 [ ] [ ] [X] [ ] EPA NPDES permit if discharging	[][]	112 [X][][][ Chemical hygiene plan in place per OSHA regulations	[][]
79 [X][][][] Monitoring results posted and records maintained	[][]	Plant Safety	
80 [X][][][] Housekeeping is orderly, building well maintained	[][]	113 [ ] [ ] [X] [ ] Gas chlorination safety: warning signs posted	[][]
81 [X][][][] Heating, ventilation and lighting are adequate	[][]	114 [ ] [ ] [X] [ ] Gas chlorination safety: lighting and fan switches outside chlorine	[][]
82 [X][][][] Standby or auxiliary power available and operational	[][]	115 [ ] [ ] [X] [ ] Gas chlorination safety: exhaust fan near floor, intake vent near	[][]
Mechanical Equipment/Pre-Treatment		116 [ ] [ ] [X] [ ] Gas chlorination safety: chlorination room opens outward with panic	[][]
83 [X][][][] Mechanical equipment in good condition, spare parts and tools on	[][]	117 [ ] [ ] [X] [ ] Gas chlorination safety: method for chlorine leak detection (alarm,	[][]
hand  84 [X][] [] [] Electrical wiring properly maintained, outlets grounded	[][]	ammonium, etc)  118 [ ] [ ] [X] [ ] Gas chlorination safety: tanks chained to wall or otherwise secured	[][]
85 [X][][][] Motors & compressors lubricated, operated per manufacturer	[][]	119 [ ] [ X] [ ] Gas chlorination safety: tank wrench and repair kits available	[][]
86 [X][][][] Motor and compressor amperage within specs and noise controlled	[1[]	120 [ ] [ X] [ ] Gas chlorination safety: cylinder on working scale	[][]
87 [ ] [ ] [X] [ ] Infiltration/inflow not excessive	[][]	121 [ ] [ ] [X] [ ] Gas chlorination safety: auto switchover and manifold for multiple	[][]
88 [X][][] Return process streams do not interfere with treatment	[][]	cylinders  122 [ ] [ ] [X] [ ] Gas chlorination safety: chlorine storage area maintained > 500F or	[][]

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89 [X][][][] Grit removal and screening equipment are properly designed and operated [][]

123 [ ] [ ] [X] [ ] Gas chlorination safety: emergency plan and PPE such as SCBA available

[][]

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IN OUT N/A N/O	COS R	IN OUT N/A N/O	COS R
124 [X][][][] Mechanical equipment protected	[][]		
125 [X][][][] Guard rails around tanks/basins and at elevated walkways	[1[]		
126 [X][][][] Fire protection adequate, including ABC type extinguisher	[11]		
127 [X][][] Potable water protected by backflow device	[1[]		

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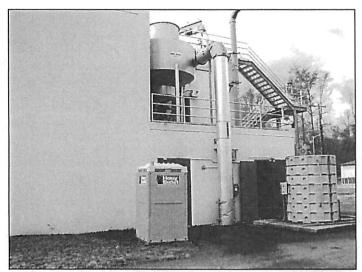
#### **General Comments**

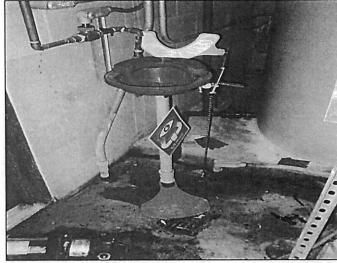
- As the first MBR plant (June 2003) in this region of Indian Country, your staff have assumed a leadership role in identifying and solving challenges to this technology, which they continue to excel at with participation in the IHS/EPA MBR study which is designed to catalogue information from a sample of MBR plants and share operational improvements with all MBR operators.
- 2) The emergency eye wash in the chlorine room is not in working order, posing a greater risk of injury to operators in the case of chemical splash. (OSHA 1910.151(c)). See picture 2.
- 3) Mr. Reyes certification as a wastewater operator with Native American Water Association and his interest in increasing his proficiency level is exemplary.
- 4) This facility has one portable toilet, but lacks lockers, showers, washer dryer, and hand wash sinks. This is a hinderance to operator hygiene. These facilities not only help to protect the operators health, but can increase their effectiveness in that they aren't required to leave in instances where their clothing has become soiled. Similar MBR plants that are of more recent construction have included all of these facilities. As a further recommendation, these facilities should be available for both genders. (OSHA 1910.141(d-f). See picture 1.
- 5) Recommend additional placards to identify the sodium hypochlorite room (within the Effluent building) for operator and emergency responder safety. It is recommended to use both placard examples shown at the end of this report. When ordering these placards, use the term "sodium hypochlorite" indicating the liquid form of chlorine. The term "chlorine" describes chlorine gas. See picture 3.

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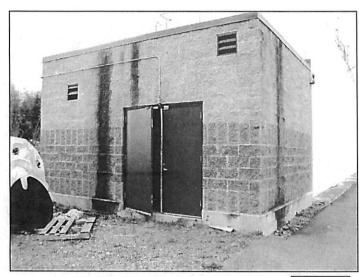
# Appendix





Picture 1

Picture 2

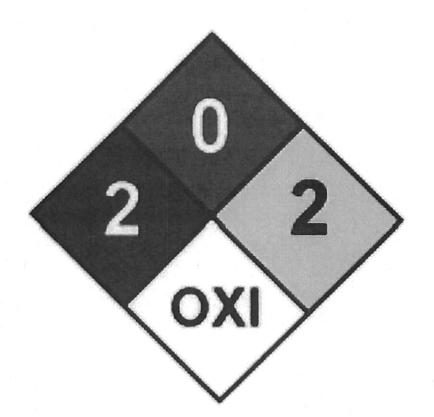


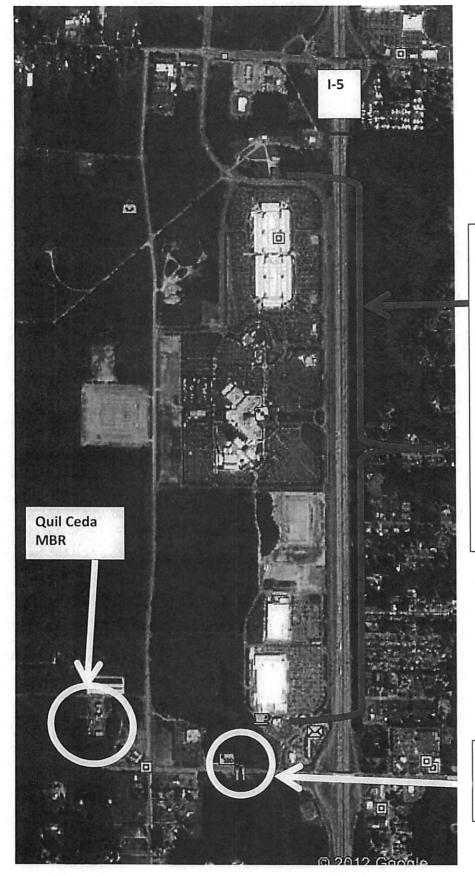
Picture 3

# CAUTION

## SODIUM HYPOCHLORITE HAZARD AREA

CAUSES BURNS, EYE DAMAGE, AND FATAL IF INHALED OR INCESTED WEAR PROTECTIVE EQUIPMENT





### Quil Ceda Village

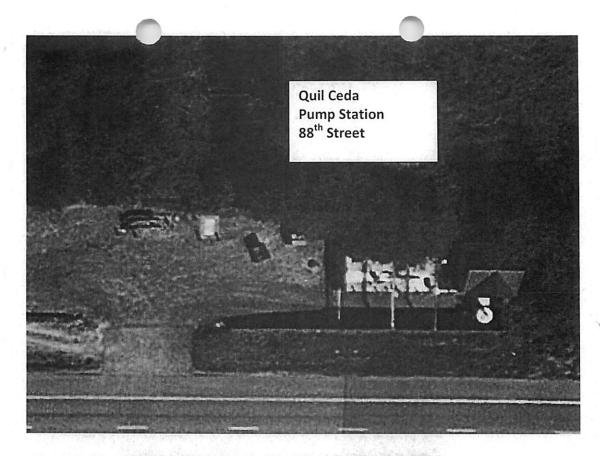
<u>Sewage</u>

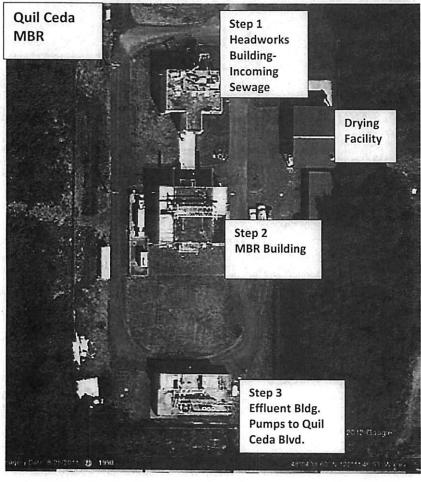
1) All Sewage gravity flows to pump station on 88<sup>th</sup>.

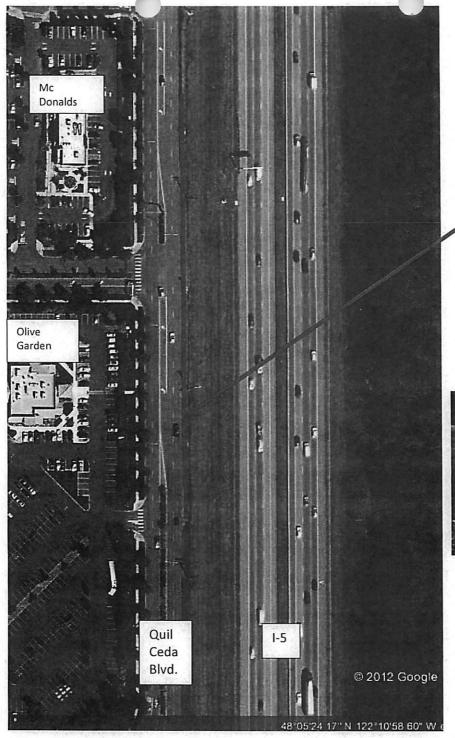
2) From 88<sup>th</sup>, pumped to MBR Plant where it gravity flows through the 3 buildings

3) From MBR, pumped down 99<sup>th</sup> street to the UIC drainfield pipes that parallel Interstate 5.

Quil Ceda Pump Station 88<sup>th</sup> Street







Here is a small portion of the Quil Ceda sewage effluent drainage area.

It comes from the MBR plant and runs along I-5 underneath rocks.

You can see the area as you drive down Quil Ceda Blvd.

